PART B - FEE(S) TRANSMITTAL							
Complete and sem	this form, together	with applicable 3 0 2006 m	le fee(s), to	: <u>Mail</u>	Mail Stop ISSUI Commissioner fo P.O. Box 1450 Alexandria, Virg	or Patents	
\2		(چ			(571)-273-2885		
INSTRUSTIONS: This appropriate All further coindicated unless children and maintenance fee notification	inn should be used for tra- rrespondence including the below or directed other as ns.	Patent, and Inches	SUE FEE and orders and no (a) specifying	PUBLIC tification a new o	CATION FEE (if required of maintenance fees correspondence address	nired). Blocks 1 through 5 will be mailed to the curre s; and/or (b) indicating a se	should be completed where nt correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Block 1 fo	or any change of address)		ree(s) I ransmittal. I l	us certificate cannot be used	for domestic mailings of the I for any other accompanying nent or formal drawing, must
FOLEY & LARI 150 EAST GILMA P.O. BOX 1497 MADISON, WI 53	, ·		Ce	rtificate of Mailing or Tran his Fee(s) Transmittal is bei with sufficient postage for fi I Stop ISSUE FEE addres TO (571) 273-2885, on the	nsmission ng deposited with the United irst class mail in an envelope s above, or being facsimile date indicated below.		
05/31/2006 WABDI				\wedge_{α}	Callie M. Bei	(Signature)	
01 FC:1501 02 FC:1504	300).00 OP).00 OP				May 25, 2006	(Date)
03 FC+8001 APPLICATION NO.	FILING DATE	00 OP	FIRST NAME	D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/786,178	10/786,178 02/25/2004			Nesnida	<u> </u>	015163-0310	4705
TITLE OF INVENTION: MICROSPECTROMETER SYSTEM WITH SELECTABLE APERTURING							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	rovisional NO \$14		\$300		\$300	\$1700	06/01/2006
EXAMINER ART			JNIT CLASS-SUBCLASS		ASS-SUBCLASS		•
ROSENBERGER, FREDERICK F 2884					250-339070		
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicati PTO/SB/47; Rev 03-02 o Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Thermo Electron Scientific Instruments Corporation Madison, WI							
Please check the appropriate	assignee category or categor	ies (will not be pri	nted on the pa	tent) :	☐ Individual ☐ Con	poration or other private gro	oup entity Government
4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2350 (enclose an extra copy of this form).				
5. Change in Entity Status (<u> </u>				
The Director of the USPTO is NOTE: The Issue Fee and Put interest as shown by the recommendation	ALL ENTITY status. See 3 requested to apply the Issue blication Fee (if required) wids of the United States Pater	Fee and Publicati	on Fee (if any	nt is no lo) or to re- other than	onger claiming SMALI apply any previously the applicant; a regist	ENTITY status. See 37 CF paid issue fee to the applicate ered attorney or agent; or the	FR 1.27(g)(2). tion identified above. e assignee or other party in
Authorized Signature	Calin	Bul			Date Ma	y 25, 2006	
Typed or printed name	Callie M. Bell	-			Registration No.	54,989	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to me tand by unc of the application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Renee C. Nesnidal, et al.

Title:

MICROSPECTROMETER

SYSTEM WITH SELECTABLE

APERTURING

Appl. No.:

10/786,178

Filing Date:

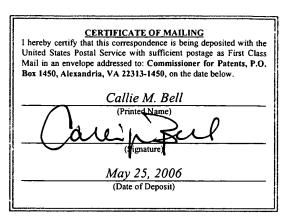
02/25/2004

Examiner:

Frederick F. Rosenberger

Art Unit:

2884



ISSUE FEE TRANSMITTAL

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B).

A credit card payment form in the amount of \$1,730.00 for payment of the Issue Fee, the Publication Fee and ten additional copies of the issued utility patent is also enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2350. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-2350.

Respectfully submitted,

Date May 25, 2006

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Callie M. Bell

Attorney for Applicants Registration No. 54,989